



STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene

Lawrence J. Hogan, Jr., Governor – Boyd K. Rutherford, Lt. Governor – Van T. Mitchell, Secretary

February 4, 2015

Dear Colleagues,

This is to update you on the current measles situation in the United States and Maryland and to provide guidance for health care providers.

2015 measles cases

- From January 1 to January 30, 2015, 102 people from 14 states in the U.S. have been reported as having measles. Most of these cases are part of a large, ongoing outbreak linked to an amusement park in California.

U.S. multi-state measles outbreak December 2014—January 2015

- The United States is currently experiencing a large, multi-state outbreak of measles linked to an amusement park in California.
- From December 28, 2014 to January 28, 2015, 67 people from 7 states in the U.S. (AZ, CA, CO, NE, OR, UT, WA), and 2 people in Mexico, have been reported to CDC as having measles related to this outbreak.
- Some of them have been hospitalized.
- Most of them were unvaccinated; others did not know their vaccination status. A minority of them were vaccinated.
- Cases have occurred in people of all ages.
- The outbreak likely started from a traveler who became infected overseas with measles, then visited the amusement park while infectious. However, no source has been identified.
- Comparison of the genomic sequences from 9 patients for which information was available show that all 9 are identical to the measles B3 virus type that caused the large measles outbreak in the Philippines in 2014.

Measles in Maryland

- Currently, Maryland does not have any measles cases associated with the multi-state outbreak.
- Maryland has not had a confirmed case of measles since 2013.
- Historically, Maryland has had high measles vaccination rates. Based on the DHMH Annual School Immunization Survey, an estimated 98% of kindergartners had documentation of 2 doses MMR vaccine for the 2013 school year. Also, based on the 2013 National Immunization Survey, an estimated 95% of 2 year olds were vaccinated with at least one dose of MMR vaccine.

General measles information

- Measles is a serious respiratory disease caused by a virus.
 - Measles infection is characterized by a prodrome of rising fever, cough, coryza and conjunctivitis lasting approximately 2-4 days (range 1-7 days). The prodrome is followed by a descending maculopapular skin rash that begins at the head and spreads to the rest of the body. The rash can last for a week, and coughing can last for 10 days.
- Measles is highly contagious and is generally transmitted by respiratory droplets. Airborne transmission has been documented hours after a measles case was in an enclosed area.
- Measles can cause health complications in up to 30% of cases, ranging from ear infections and diarrhea to pneumonia and encephalitis, and rarely, death.
 - Children younger than 5 years of age and adults older than 20 years of age are at higher risk measles complications.
 - About 1 in 4 unvaccinated people in the U.S. who get measles will be hospitalized; about 1 in 500 may die.

Guidance for healthcare providers and healthcare settings

- Healthcare providers should be vigilant about measles—
 - Ensure all patients are up to date on measles, mumps, rubella (MMR) vaccine.
 - Consider measles in patients presenting with febrile rash illness and clinically compatible measles symptoms (cough, coryza, and conjunctivitis), and ask patients about recent travel internationally or to domestic venues frequented by international travelers, as well as a history of measles exposures in their communities.
 - Promptly isolate patients with suspected measles to avoid disease transmission and immediately report the suspect measles case to the health department.
 - Obtain specimens for testing from patients with suspected measles, including viral specimens for genotyping, which can help determine the source of the virus. Contact the local health department with questions about submitting specimens for testing.
- People who work in healthcare settings should have documented evidence of immunity to measles according to the Advisory Committee on Immunization Practices.
 - Measles outbreaks in healthcare settings can disrupt care of patients and put them at higher risk for severe disease. This is especially important for patients who have underlying medical conditions, including weakened immune systems.
 - Refer to “Immunization of Health-Care Personnel: Recommendations of the Advisory Committee on Immunization Practices” (www.cdc.gov/mmwr/pdf/rr/rr6007.pdf).

For more information on measles in general, please refer to the CDC measles website: www.cdc.gov/measles

For more information on the measles outbreak, please refer to the CDC measles website:
www.cdc.gov/measles/cases-outbreaks

Thank you for your assistance.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Lucy Wilson', is positioned above the typed name.

Lucy Wilson, MD, ScM
Chief, Center for Surveillance, Infection Prevention and Outbreak Response
Prevention and Health Promotion Administration
Maryland Department of Health and Mental Hygiene